



**Building Safety Division**  
 Phone # - 309-434-2226  
 Fax # - 309-434-2857

# Lawn Irrigation Permit Application

Owner:	Application Date:
Site Address:	Phone #:
Irrigation Contractor:	Mobil #:
State ID:	
Installers Names & State ID's :	

**Description of Work**

Please Check One:			
New Construction <input type="checkbox"/>	Replacement / Repair <input type="checkbox"/>	1 or 2 Family Residential <input type="checkbox"/>	Multi-Family / Commercial <input type="checkbox"/>

Type of Equipment:	
Type of Equipment R.P.Z. (\$20.00) :	Model #
System (\$10.00):	
Number of Sprinkler Heads(\$1.00 each):	PUMP (Y/N) (\$10.00):
Equipment & Rain Sensor Location:	
Separate Water Service (Y/N) (\$25.00):	SIZE:
Special Information, Description, Names, etc.	
Application Fee (\$30.00):	
Plumbers Name & License #:	
<b>TOTAL COST OF WORK:</b>	

<b>Contractor/Applicant Signature:</b>
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PLEASE ATTACH PRINTS / SKETCHES TO THIS APPLICATION.



**NOTE: PERMITS MUST BE OBTAINED BEFORE WORK BEGINS.  
 SUBMISSION OF THIS FORM DOES NOT GUARANTEE APPROVAL.**

**APPLICATION VOID IF WORK IS NOT STARTED WITHIN  
 6-MONTHS AFTER PERMIT ISSUANCE.**